DEPARTMENT OF HEALTH AND FAMILY SERVICES

STATE OF WISCONSIN Bureau of Quality Assurance

Division of Disability and Elder Services

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DIRECTORY OF LICENSED WISCONSIN HOME HEALTH AGENCIES by County Served

P.O. Box 2969 Madison, WI 53701-2969

License and Certification

Please note all facilities below are certified to serve Medicare recipients. Those also certified to serve Medicaid recipients are indicated at the left.

Numbers Provider Name and Address Administrator and Phone Region

COUNTY SERVED: Vilas

Lic. 251 **BAY AREA HEALTH LLC** CAROLE ROBERTSON **NORTHERN**

Cert. 52-7225 1601 BEASER AVE (715) 682-9500 ASHLAND, WI 54806 Certified for FAX: (715) 682-9580

Medicaid

Services Home Health Aide Personal Care Worker Homemaker **Nursing Care**

Provided: Physical Therapy

> PHONE: (715) 561-3204 FAX: (715) 561-2386 Branch: BAY AREA HEALTH LLC

303 TACONITE STREET **HURLEY** WI 54534

Lic. 1013 **UNITED HOME CARE TINA WAITE NORTHERN**

Cert. 52-927 RIVERSIDE PLAZA (906) 265-6118 **Certified for** IRON RIVER, MI 49935 FAX: (906) 265-6135

Medicaid

Services Home Health Aide Medical Social Service Nursing Occupational Therapy Provided:

Physical Therapy Speech Pathology

JUDY REAS Lic. 27 **COMMUNITY HEALTH RESOURCES NORTHERN**

1133 S 4TH AVE BX 110 (715) 762-4600 Cert. 52-7125 **Certified for** PARK FALLS, WI 54552 FAX: (715) 762-2835 Medicaid

Services Home Health Aide Nursing Care

Personal Care Worker Occupational Therapy Provided:

Physical Therapy Speech Therapy

Branch: COMMUNITY HEALTH RESOURCES- ASHLAND PHONE: (715) 682-6892 FAX: (715) 682-4090

101 W. MAIN ST.

ASHLAND WI 54806

Lic. 202 SUPPORTIVE HOME SERVICES ANNE OSWALD-BALSAVICH **NORTHERN**

(715) 762-3200 Cert. 52-7194 PO BOX 450 1181 N 4TH AVE Certified for PARK FALLS, WI 54552 FAX: (715) 762-3359 Medicaid

Services

Home Health Aide Medical Social Service Homemaker Laboratory Provided: **Nursing Care** Occupational Therapy Personal Care Worker Physical Therapy

Speech Therapy

Lic. 253 MINISTRY HOME CARE HOME HEALTH-RHINELANDER DORINDA JENSEN **NORTHERN**

Cert. 52-7218 1860 N STEVENS ST PO BOX 716 (715) 361-2230 RHINELANDER, WI 54501 FAX: (715) 361-2239 Certified for

Medicaid

Services Home Health Aide Medical Social Service **Nursing Care** Occupational Therapy

Provided: Physical Therapy Speech Therapy

PHONE: (715) 356-8805 FAX: (715) 356-8875 Branch: DR. KATE HOME HEALTH

1571 HIGHWAY 51 N. SUITE C P. O. BOX 770

ARBOR VITAE WI 54568